

DIOCESE OF WINONA-ROCHESTER
Nomination of Cemetery Lay Representative/Trustees

Dear Bishop Barron:

I herewith nominate:

Title	Mr/Mrs/Ms	Name	Telephone
_____		_____	_____
		Address	Email*
		_____	_____
		City	Zip code
		_____	_____

and

Title	Mr/Mrs/Ms	Name	Telephone
_____		_____	_____
		Address	Email*
		_____	_____
		City	Zip code
		_____	_____

to be appointed as cemetery lay representative/trustees of

_____ at _____ Minnesota
(Name of Cemetery) (Town)

for one term to begin January 1, 2023, and to end December 31, 2024.

(Pastor Signature)

(Date)

*Please provide an email address for each trustee if at all possible.